							•				
Fill	in this information to	o identify your ca	ase:								
De	ebtor 1 Kevin Charles Hersh, Sr										
Debtor 2 Kristen Elizabeth Hersh (Spouse, if filing)						_					
Un	ited States Bankrup	tcy Court for the	: EASTERN DISTRICT	OF PENNSYLVANIA							
Case number (If known) 23-11336							Ched	k if this is:			
								ın amende	d filing		
									ent showin as of the fo	0 1	etition chapter g date:
0	fficial Form	106I					Ī	/IM / DD/ Y	YYY		
S	chedule I: `	Your Inc	ome								12/1
sup spo atta	plying correct info use. If you are sep ch a separate shee	rmation. If you arated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your sp th you, do not include	ouse i inform	s livi natio	ing with on abou	you, inclu t your spo	ude inforr ouse. If m	mation ore spa	about your ace is needed,
1.	Fill in your employment			D.U.							
	information.			Debtor 1				Debtor 2 or non-filing spouse			
	If you have more attach a separate		Employment status	■ Employed				☐ Employed			
	information about additional			☐ Not employed				☐ Not employed			
	employers.		Occupation	-							
	Include part-time, self-employed wo		Employer's name								
	Occupation may in or homemaker, if		Employer's address								
			How long employed th	nere?				_			
Pa	Give Det	tails About Mor	nthly Income								
	imate monthly incouse unless you are		ate you file this form. If y	ou have nothing to rep	ort for	any I	ine, write	e \$0 in the	space. In	clude y	our non-filing
	ou or your non-filing e space, attach a se		ore than one employer, co	ombine the information	for all e	emplo	oyers for	that perso	n on the li	ines bel	ow. If you need
					For			btor 1	For Debtor 2 or non-filing spouse		
2.			ry, and commissions (becalculate what the monthly		2.	\$		0.00	\$		N/A
3.	Estimate and list	t monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A

0.00

N/A

Calculate gross Income. Add line 2 + line 3.

Debtor 1 Debtor 2		Kevin Charles Hersh, Sr Kristen Elizabeth Hersh	Case	number (<i>if known</i>)	23-11336			
Cor		by line 4 here			For Debtor 1		Debtor 2 or filing spouse	
_	·							
5.	List all payroll deductions:					•		
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$_ \$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$ —	0.00	\$ 	N/A N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	8,095.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g. 8h.	Pension or retirement income Other monthly income Specific MILITARY DISABILITY	8g. 8h.+	\$ \$	0.00	+ \$	N/A N/A	
	OII.	Other monthly income. Specify: MILITARY DISABILITY IRS tax refund (prorated)	_ 011.+	\$ —	1,277.55 755.25	* \$—	N/A N/A	
		ino tax retuind (protated)			733.23	_	IV/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	10,127.80	\$	N/A	
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$	10	0,127.80 + \$		N/A = \$ 10	0,127.80
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depend		•	•	chedule J. 11. +\$	0.00
12.	12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies							0,127.80
13.	Do y	ou expect an increase or decrease within the year after you file this form?	?				Combine monthly	
		Yes. Explain: Debtor started a new business in May 2023. Once absorbed, Debtor expects his income to increase		nitial	start-up and	reinve	stment costs a	are

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